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Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2008

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

For calendar year 2008 or other tax year beginning and ending

Form header section including: A Check box if address changed, B Exempt under section 501(c)(3), C Book value of all assets at end of year, D Employer identification number, E Unrelated business activity codes, F Group exemption number, G Check organization type.

H Describe the organization's primary unrelated business activity. DEBT-FINANCED INCOME FROM INVESTMENTS.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of PHILIP J. VARNUM Telephone number 503-222-2924

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include 1a Gross receipts or sales, 2 Cost of goods sold, 3 Gross profit, 4a Capital gain net income, 5 Income (loss) from partnerships, 6 Rent income, 7 Unrelated debt-financed income, 8 Interest, annuities, royalties, 9 Investment income, 10 Exploited exempt activity income, 11 Advertising income, 12 Other income, 13 Total.

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include 14 Compensation of officers, directors, and trustees, 15 Salaries and wages, 16 Repairs and maintenance, 17 Bad debts, 18 Interest, 19 Taxes and licenses, 20 Charitable contributions, 21 Depreciation, 22 Less depreciation claimed, 23 Depletion, 24 Contributions to deferred compensation plans, 25 Employee benefit programs, 26 Excess exempt expenses, 27 Excess readership costs, 28 Other deductions, 29 Total deductions, 30 Unrelated business taxable income before net operating loss deduction, 31 Net operating loss deduction, 32 Unrelated business taxable income before specific deduction, 33 Specific deduction, 34 Unrelated business taxable income.

STATUTE UNIT RECEIVED MAR 28 2013 TPR BRANCH OGDEN. RECEIVED MAR 25 2013 OGDEN UT IRS-OSC

NO STATUTE ISSUE

0436830328 APR 01 '13

971016 SCANNED APR 03 2013

**Part III Tax Computation**

**35 Organizations Taxable as Corporations.** See instructions for tax computation.  
 Controlled group members (sections 1561 and 1563) check here  See instructions and:  
**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):  
 (1) \$ \_\_\_\_\_ (2) \$ \_\_\_\_\_ (3) \$ \_\_\_\_\_  
**b** Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ \_\_\_\_\_  
 (2) Additional 3% tax (not more than \$100,000) \$ \_\_\_\_\_  
**c** Income tax on the amount on line 34 **35c** 0.

**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:  
 Tax rate schedule or  Schedule D (Form 1041) **36**

**37 Proxy tax.** See instructions **37**

**38 Alternative minimum tax** **38**

**39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies **39** 0.

**Part IV Tax and Payments**

**40a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **40a**

**b** Other credits (see instructions) **40b**

**c** General business credit. Attach Form 3800 **40c**

**d** Credit for prior year minimum tax (attach Form 8801 or 8827) **40d**

**e** Total credits. Add lines 40a through 40d **40e**

**41** Subtract line 40e from line 39 **41** 0.

**42** Other taxes. Check if from:  Form 4255  Form 8611  Form 8697  Form 8866  Other (attach schedule) **42**

**43** Total tax. Add lines 41 and 42 **43** 0.

**44 a** Payments: A 2007 overpayment credited to 2008 **44a** 23,528.

**b** 2008 estimated tax payments **44b** 30,000.

**c** Tax deposited with Form 8868 **44c**

**d** Foreign organizations: Tax paid or withheld at source (see instructions) **44d**

**e** Backup withholding (see instructions) **44e**

**f** Other credits and payments:  Form 2439  Form 4136  Other \_\_\_\_\_ Total **44f**

**45** Total payments. Add lines 44a through 44f **45** 53,528.

**46** Estimated tax penalty (see instructions). Check if Form 2220 is attached  **46**

**47** Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed **47**

**48** Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid **48** 53,528.

**49** Enter the amount of line 48 you want Credited to 2009 estimated tax 53,528. Refunded **49** 0.

**Part V Statements Regarding Certain Activities and Other Information** (See instructions on page 18)

**1** At any time during the 2008 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here **INDIA, CAYMAN ISLANDS** **Yes**  **No**

**2** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for other forms the organization may have to file **X**

**3** Enter the amount of tax-exempt interest received or accrued during the tax year **\$ 1,051.**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **N/A**

<b>1</b> Inventory at beginning of year	<b>1</b>		<b>6</b> Inventory at end of year	<b>6</b>	
<b>2</b> Purchases	<b>2</b>		<b>7</b> Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	<b>7</b>	
<b>3</b> Cost of labor	<b>3</b>		<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	<b>Yes</b>	<b>No</b>
<b>4a</b> Additional section 263A costs	<b>4a</b>				<input checked="" type="checkbox"/>
<b>b</b> Other costs (attach schedule)	<b>4b</b>				
<b>5</b> Total. Add lines 1 through 4b	<b>5</b>				<input checked="" type="checkbox"/>

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here** *Norothy Lemelson* 10/19/13 **President**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

May the IRS discuss this return with the preparer shown below (see instructions)?  **Yes**  **No**

**Paid Preparer's Use Only**

Preparer's signature *Jan M Seaney* Date **3/7/2013** Check if self-employed

Firm's name (or yours if self-employed), address, and ZIP code **Clark Nuber, PS  
10900 NE 4th ST, STE 1700  
Bellevue, WA 98004**

Preparer's SSN or PTIN **P00000565**

EIN **91-1194016**

Phone no. **425-454-4919**

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)(see instr. on pg 19)

1 Description of property

Table with 3 main columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income. Includes rows (1)-(4) and a Totals row showing 0.

Schedule E - Unrelated Debt-Financed Income (See instructions on page 19)

Table with 5 main columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions. Includes rows (1)-(4) and a Totals row showing 0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (See instructions on page 20)

Table with 6 main columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income (loss), 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5. Includes rows (1)-(4) and a Totals row showing 0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization**

(see instructions on page 21)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>	0.			0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income**

(see instructions on page 21)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols. 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b>	0.	0.				0.

**Schedule J - Advertising Income** (see instructions on page 21)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals (carry to Part II, line (5))</b>	0.	0.				0.

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>(5) Totals from Part I</b>	0.	0.				0.
<b>Totals, Part II (lines 1-5)</b>	0.	0.				0.

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions on page 22)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
<b>Total. Enter here and on page 1, Part II, line 14</b>			0.

**THE LEMELSON FOUNDATION  
STATEMENT ATTACHED TO AND MADE A PART OF  
FORM 990-T, EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN  
FOR CALENDAR YEAR 2008**

**FORM 926: SELCO SOLAR LIGHT PRIVATE LIMITED**

PART III - ADDITIONAL INFORMATION

REG. 1.6038B-1(C)(6) – NOT APPLICABLE

TEM. REG. 1.6038B-1T(C):

- 1) TRANSFEROR: SEE FORM 926, PART I
- 2) TRANSFER:
  - a. TRANSFEREE: SEE FORM 926, PART II
  - b. DESCRIPTION OF TRANSACTION: CAPITAL CONTRIBUTION
- 3) CONSIDERATION RECEIVED: OWNERSHIP INTEREST IN SELCO SOLAR LIGHT PRIVATE LIMITED
- 4) PROPERTY TRANSFERRED: CASH - \$350,000
- 5) N/A

TEMP. REG. 1.6038B-1T(D)- NOT APPLICABLE

**STATEMENT PURSUANT TO TREASURY REG. SECTION 1.351-3(A) BY  
THE LEMELSON FOUNDATION  
(EIN: 88-0391959), A SIGNIFICANT TRANSFEROR**

**THIS STATEMENT IS FILED BY THE LEMELSON FOUNDATION AND  
ATTACHED TO AND MADE PART OF THE FORM 990-T  
FOR CALENDAR YEAR 2008**

**STATEMENT FILED PURSUANT TO TREASURY REG. SEC 1.351-3(A)**

- 1) THE TRANSFEREE CORPORATION IS SELCO SOLAR LIGHT PRIVATE LIMITED [EIN: FOREIGN], A FOREIGN CORPORATION ORGANIZED UNDER THE LAWS OF INDIA.
- 2) THE LEMELSON FOUNDATION TRANSFERRED THE ASSETS IDENTIFIED IN (3) BELOW ON 12/23/2008.
- 3) THE TRANSFERRED PROPERTY HAD AN AGGREGATE FAIR MARKET VALUE OF USD 350,000 AND AN AGGREGATE BASIS OF USD 350,000 IMMEDIATELY BEFORE THE EXCHANGE.

PROPERTY TRANSFERRED	FMV	AGGREGATE BASIS
CASH	USD 350,000	USD 350,000
TOTAL	USD 350,000	USD 350,000

- 4) NO PRIVATE LETTER RULINGS WERE ISSUED IN CONNECTION WITH THE SECTION 351 EXCHANGE.

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FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 21
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DESCRIPTION	AMOUNT
BROOKSIDE	<11,296.>
COMMONFUND IV	331.
COMMONFUND V	174.
LONE JUNIPER	<44,298.>
LYME FOREST FUND	<89,964.>
VENTURE IV	<10,785.>
VENTURE V	<23,867.>
VENTURE VI	<1,441.>
BRANDYWINE 2005	572.
BRANDYWINE 2006	<852.>
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TOTAL TO FORM 990-T, PAGE 1, LINE 5	<181,426.>

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FORM 990-T	CONTRIBUTIONS	STATEMENT 22
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DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
PORTION OF CURRENT YEAR GRANTS	N/A	19,192.
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TOTAL TO FORM 990-T, PAGE 1, LINE 20		19,192.

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FORM 990-T	OTHER DEDUCTIONS	STATEMENT 23
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DESCRIPTION	AMOUNT
INVESTMENT FEES	10,284.
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TOTAL TO FORM 990-T, PAGE 1, LINE 28	10,284.

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